

EXHIBIT 1

PROOF OF CLAIM

Name of Debtor

Case Number

NOTE: See Reverse for List of Debtors and Case Numbers

This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Name of Creditor and Address

11321241001514

SANDLER LIVING TRUST DATED AUGUST 29 2005

C/O ROBERT B SANDLER & PATRICIA D SANDLER TRUSTEES

8912 E PINNACLE RD BOX 591

SCOTTSDALE AZ 85255

☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.☐ Check box if you have never received any notices from the bankruptcy court or BMC Group in this case.☐ Check box if this address differs from the address on the envelope sent to you by the court.

REC'D SEP 25 2006

DO NOT FILE THIS PROOF OF CLAIM FOR A SECURED INTEREST IN A BORROWER THAT IS NOT ONE OF THE DEBTORS

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

THIS SPACE IS FOR COURT USE ONLY

Creditor Telephone Number (702) 821-4875

Last four digits of account or other number by which creditor identifies debtor

Check here ☐ replaces a previously filed claim dated _____ or ☐ amends**1 BASIS FOR CLAIM**☐ Goods sold☐ Personal injury/wrongful death☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)☐ Unremitted principal☐ Services performed☐ Taxes☐ Wages, salaries, and compensation (fill out below)☐ Other claims against servicer (not for loan balances)☐ Money loaned☐ Other (describe briefly)

Last four digits of your SS # _____

Unpaid compensation for services performed from _____ to _____

(date) (date)

2 DATE DEBT WAS INCURRED**3 IF COURT JUDGMENT, DATE OBTAINED****4 CLASSIFICATION OF CLAIM**

Check the appropriate box or boxes that best describe your claim and state the amount of the claim at the time case filed. See reverse side for important explanations.

UNSECURED NONPRIORITY CLAIM☐ Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or c) none or only part of your claim is entitled to priority.**UNSECURED PRIORITY CLAIM**☐ Check this box if you have an unsecured claim, all or part of which is entitled to priority.

Amount entitled to priority \$ _____

Specify the priority of the claim

☐ Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B)☐ Wages, salaries, or commissions (up to \$10,000)* earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier. 11 U.S.C. § 507(a)(4)☐ Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5)**SECURED CLAIM**☐ Check this box if your claim is secured by collateral (including a right of setoff).

Brief description of collateral

☐ Real Estate ☐ Motor Vehicle ☐ Other _____

Value of Collateral \$ _____

Amount of arrearage and other charges at time case filed included in secured claim if any \$ _____

☐ Up to \$2,225* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7)☐ Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8)☐ Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (____)

* Amounts are subject to adjustment on 4/1/07 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

5 TOTAL AMOUNT OF CLAIM

\$ _____ (unsecured) \$ _____ (secured) \$ _____ (priority) \$ _____ (Total)

☐ Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.**6 CREDITS** The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.**7 SUPPORTING DOCUMENTS** Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.**8 DATE-STAMPED COPY** To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is actually received on or before 5:00 pm, prevailing Pacific time, on November 13, 2006 for each person or entity (including individuals, partnerships, corporations, joint ventures, trusts and governmental units).

BY MAIL TO
BMC Group
Attn: USACM Claims Docketing Center
P.O. Box 911
El Segundo, CA 90245-0911BY HAND OR OVERNIGHT DELIVERY TO
BMC Group
Attn: USACM Claims Docketing Center
1330 East Franklin Avenue
El Segundo, CA 90245**THIS SPACE FOR COURT USE ONLY**Filed Date,
9/25/2006

DATE

9/21/06

SIGN and print the name and title, if any, of the creditor or other person authorized to file the claim (attach copy of power of attorney if any).

Robert B Sandler - Sandler Living Trust Dated 8/29/05

USA CMC



1072500218

Penalty for presenting fraudulent claim is a fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 AND 3571

LIVE ECF - Filing Of Claim

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U.S. Bankruptcy Court

District of Nevada

Notice of Electronic Claims Filing

The following transaction was received from BMC GROUP, INC , on 10/2/2006 at 10 53 AM PDT

Case Name: USA GOVERNMENT SERVICE COMPANY
Case Number: [REDACTED]
Creditor Name: SANDLER LIVING TRUST DATED AUGUST 29 2005
C/O ROBERT B SANDLER & PATRICIA D SANDLE
8912 E PINNACLE RD
BOX 591
SCOTTSDALE AZ 85255
Claim Number: [REDACTED] Claims Register
Total Amount Claimed.

The following document(s) are associated with this transaction

Document description.Main Document

Original filename: 10725_SandlerLivingTrust8-29-2005 pdf

Electronic document Stamp:

[STAMP bkecfStamp_ID=989277954 [Date=10/2/2006] [FileNumber=7356830-0]
[81cf8dc1a5ef32bc95efc1345bdfb1228b6acdf8367cc7ab0ff9f34773c2326b40a
a5b0e1041a7e69d5dc5229a2c9d9bbaa43dac103f96c9be8b485e83c308c]]

06-10725-lbr Notice will be electronically mailed to:

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